

**Community-Based Prevention & Promotion Workgroup  
Meeting Minutes  
06.30.2015**

**Attending:** Carol Maloney, Charlie Biss, Beth Sausville, Danielle Lindley, Matt Wolf, Julie Cunningham, Marcia LaPlante, Greg Stefanski, Tracey Mongeon, Diane Bugbee, Andrea Grimm, Sue Bloomer, Sadie Fischesser & Karen Garbarino.

Agenda Items	Discussion Points	Decisions/Actions
<b>Finalize Goals</b>	<ul style="list-style-type: none"> <li>• The group reviewed and agreed the following goals for the next years' work:               <ul style="list-style-type: none"> <li>○ Prevention frameworks focused on all children, youth and families are coordinated at state and local levels.</li> <li>○ Health Care reform and Integrating Family Services intersect in the development of community-based and prevention activities for VT Children, youth and families.</li> <li>○ Communities are supported in their efforts to promote the health and well-being of children, youth and families.</li> <li>○ Lifelong health and well-being frameworks focused on all children, youth and families are coordinate at state and local levels.</li> </ul> </li> </ul>	Finalized and added to the groups Workplan.
<b>Prioritizing Action Steps</b>	<ul style="list-style-type: none"> <li>• The attendees split into four small groups, once concentrated on each of the four goals above. The group's generated ideas for activities the workgroup could undertake related to their assigned goal. Each group was asked to prioritize two potential action steps. The steps prioritized by the group appear in bold below.               <ul style="list-style-type: none"> <li>○ <i>Goal # 1: Prevention frameworks focused on all children, youth and families are coordinated at state and local levels.</i> <ul style="list-style-type: none"> <li>i. <b>Inventory frameworks being used to get a better understanding of their function and the population being served;</b> <ul style="list-style-type: none"> <li>* Examples: VT Prevention framework (VDH), home visitor's guidelines, Strengthening Families, MTSS, PBIS</li> </ul> </li> <li>ii. <b>Create a subcommittee to look at what we have and identify where frameworks intersect and/or conflict.</b></li> <li>iii. <b>Convene a collaborative meeting with representatives from AHS, AOE and HealthCare at the state level and replicate those at local levels.</b></li> </ul> </li> <li>○ <i>Goal # 2: Health Care reform and Integrating Family Services intersect in the development of community-based promotion and prevention activities for VT children, youth and families.</i> <ul style="list-style-type: none"> <li>i. <b>Create and coordinate learning opportunities in/with communities between health care providers and human services providers using available data to identify an area for targeted work (including but not limited Community Health Needs Assessment, Youth Risk Behavior Survey, and other reports), then suggest ways this process could be embedded in ongoing IFS work.</b></li> <li>ii. Integrate IFS and other AHS efforts like the Blueprint for Health, Hub &amp; Spoke, etc.</li> <li>iii. Increase collaboration with hospitals.</li> </ul> </li> </ul> </li> </ul>	At the next meeting, we will try to identify 2-3 action steps for the work group to focus on in the next year.

	<ul style="list-style-type: none"> <li>iv. Increase collaboration with providers not part of other medical networks (such as natural health providers, chiropractors, etc.).</li> <li>v. Centralized referral system for all kinds of health care and human service's needs (expand the capacity of VT 211?).</li> <li>vi. Coordination between EMR/EHR Systems across healthcare providers and human services providers.</li> <li>○ <i>Goal # 3: Communities are supported in their efforts to promote the health and well-being of children, youth and families.</i> <ul style="list-style-type: none"> <li>i. <b>Identify effective needs assessment tools/models for use by communities.</b></li> <li>ii. <b>Identify resources to help communities conduct needs assessments and promote implementation, then suggest ways this process could be embedded in ongoing IFS work.</b></li> <li>iii. <b>Conduct a community needs assessment where parent/family voice is heard and inform decisions (include the governance group).</b></li> <li>iv. <b>Inventory existing programs that support this initiative (drawing on the work done in communities post ACEs training).</b></li> <li>v. Using data/trend lines should inform practice and decisions (RBA).</li> <li>vi. Developing a prevention model through assessment and referral.</li> </ul> </li> <li>○ <i>Goal # 4: Lifelong health and well-being frameworks focused on all children, youth and families are coordinated at state and local levels.</i> <ul style="list-style-type: none"> <li>i. <b>Develop common definitions/understandings of what we mean by "health", "well-being", and "frameworks".</b></li> <li>ii. <b>Develop a list of health and well-being frameworks.</b></li> <li>iii. Identify shared outcomes at the state and local levels.</li> <li>iv. Identify outcomes for each framework, making sure to pay attention to what we mean by "framework", identify programs vs practices, and making sure our language is user-friendly (that communities know what we mean).</li> </ul> </li> </ul>	
<b>To-Do</b>	<ul style="list-style-type: none"> <li>● In advance of the next meeting, group members will: <ul style="list-style-type: none"> <li>○ All members will send Charlie and Carol ideas for the inventories in Goals 1 and 4.</li> <li>○ Carol and Charlie will work with Carolyn to identify a next meeting time.</li> <li>○ Carol and Charlie will distribute the list of potential action items.</li> <li>○ All members will individuals prioritize the top 2-3 items they suggest the group accomplish in the next year.</li> <li>○ Carol will distribute the information related to the work of the SIMS grant and the Green Mountain Care Board; all members will review.</li> </ul> </li> </ul>	